

P.O. Box 480 Jefferson City, MO 65102-0480 http://dese.mo.gov

Missouri Department of Elementary and Secondary Education

— Making a positive difference through education and service —

April 28, 2008

Dear Superintendent/Agency Director:

Each responsible public agency in the state that provides services to students with disabilities must submit annual assurances to the Department of Elementary and Secondary Education regarding their compliance with the applicable federal and state statutes and regulations.

Attached to this communication is the annual Assurance Statement that must be signed and submitted by **June 15, 2008**, to:

Division of Special Education - Compliance Attn: Dana Desmond Department of Elementary and Secondary Education P.O. Box 480 Jefferson City, Missouri 65102

If you have any questions regarding the Assurance Statement or the requirements for submitting assurances, please contact the Compliance Section at 573-751-0186 or via e-mail at webreplyspeco@dese.mo.gov.

Sincerely,

Margaret Strecker, Director Special Education Compliance

Mayor Streeker

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Enclosures

Assurances regarding Implementation of

PART B OF THE INDIVIDUALS WITH DISABILITIES EDUCATION ACT, AS AMENDED BY THE INDIVIDUALS WITH DISABILITIES EDUCATION ACT AMENDMENTS OF 2004

Requirements during State Fiscal Year 2009

Public Agency (DMH, SSSH, MSB, MSD)

| For the purposes of implementing provisions of the Individuals with Disabilities Education Act | | | |
|--|--------------------------------|---------------------------|----|
| Amer | adments of 2004, the | assures that throughout t | he |
| Agency | | | |
| period of the State Fiscal year 2009, it will comply with all of the requirements of Part B of the | | | |
| IDEA, as amended by the IDEA Amendments of 2004, including, all of the policies and | | | |
| procedures approved as part of the agency's local compliance plan under Part B of the IDEA | | | |
| which is effective beginning July 1, 2008. | | | |
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| | Superintendent/Agency Director | Special Education Contact | |
| | Print Name | Print Name | |

Signature/Date

Signature/Date